MEMBERSHIP APPLICATION FOR THE

6th Regiment South Carolina Volunteer Infantry

A HISTORICAL REENACTMENT AND LIVING HISTORY SOCIETY

Applicant/Contact Information

Name: Bratton (Last) | John (First) | William (Middle)

Address: 2334 Old Home Place Rd. (Street / Apt / PO Box) | Winnsboro (City) | SC (State) | 29732 (Zip Code)

Home Phone: 803-329-0491 **Work Phone:** 803-326-6783 **Cell Phone:** None

E-Mail Address: genjohnbratton@sevenpinesbattlefield.com **Birth Date:** March 7, 1831

Health (Reenacting can be extremely demanding with some inherent element of physical risk)

Rate your overall physical health by checking one appropriate box below...

I consider my health to be... **Excellent:** ☑ **Good:** ☐ **Fair:** ☐ **Poor:** ☐

List any medical conditions you may have and/or any prescribed medications you use...

Dysentery, Scurvy

Contributing Skills or Talents

List any skills or talents you could contribute to help assist and improve the Sixth Regiment.

Affidavit

I wish to join the 6th Regiment South Carolina Volunteer Infantry. I understand that reenacting is a physical hobby with some inherent element of physical risk. I accept these risks and agree not to hold the 6th Regiment or it's members, individually or as a group, responsible for any injuries to myself or damage to my belongings that may occur while participating in Regimental or Palmetto Battalion Activities.

I have also completely read page two of this document and I fully accept and agree to the contents within addressing these items of concern, 1)- Regiment, Company and Battalion Dues, 2)- Unit Standards and 3)- Dual Membership and Conflicting Organizations.

Applicant: _____ **Date:** _____

Witness: _____ **Date:** _____